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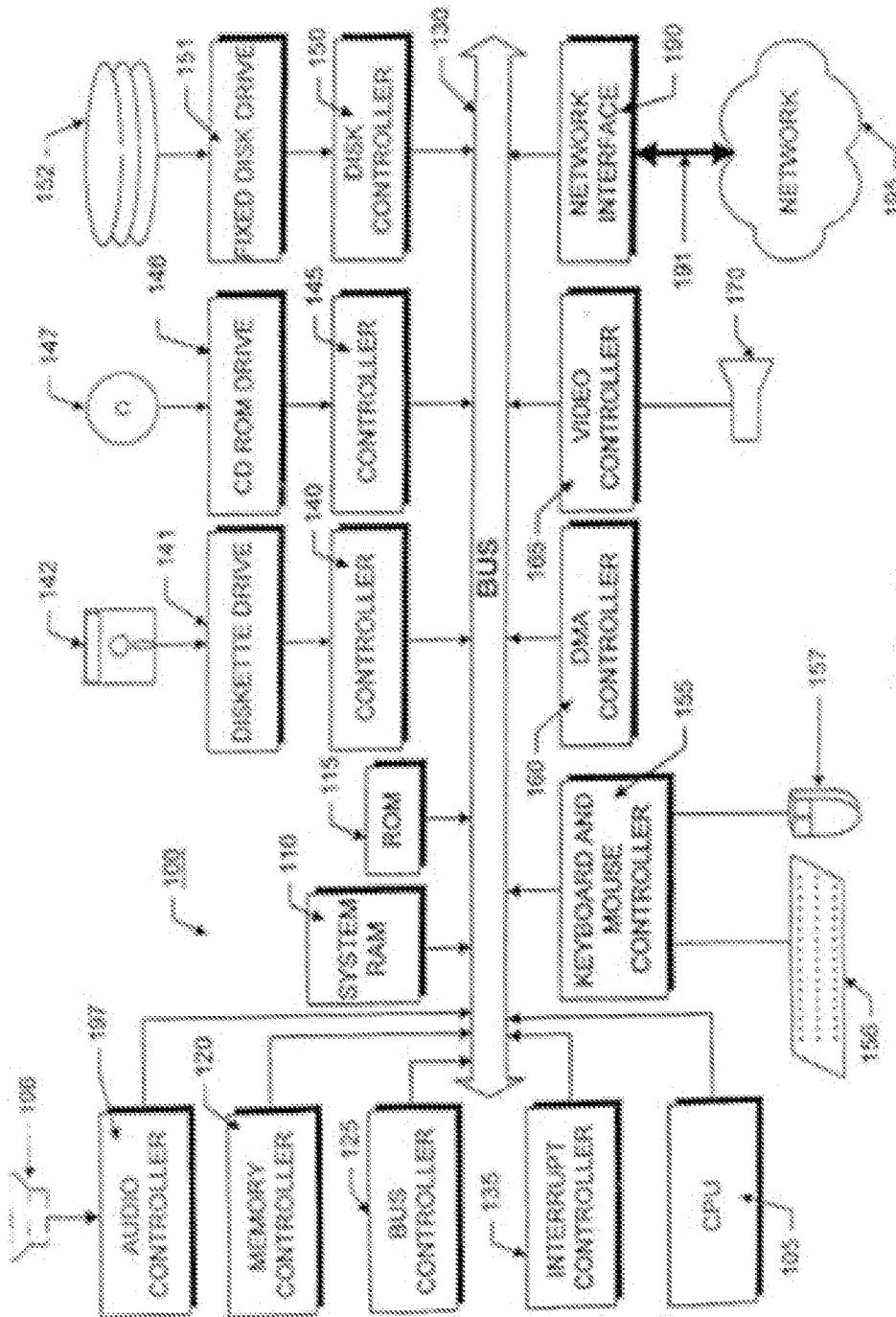


Fig. 1
(PRIOR ART)

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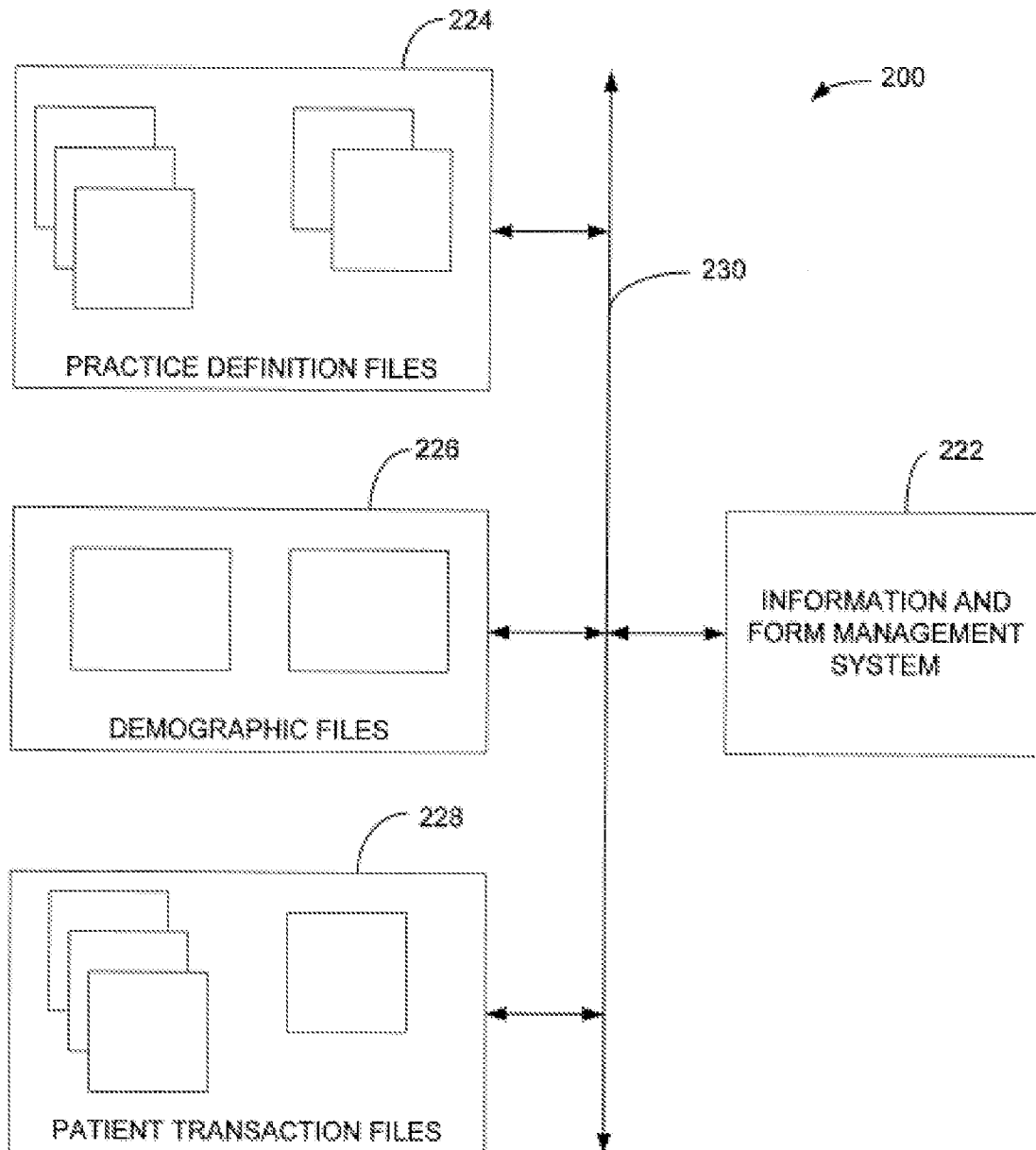


Fig. 2

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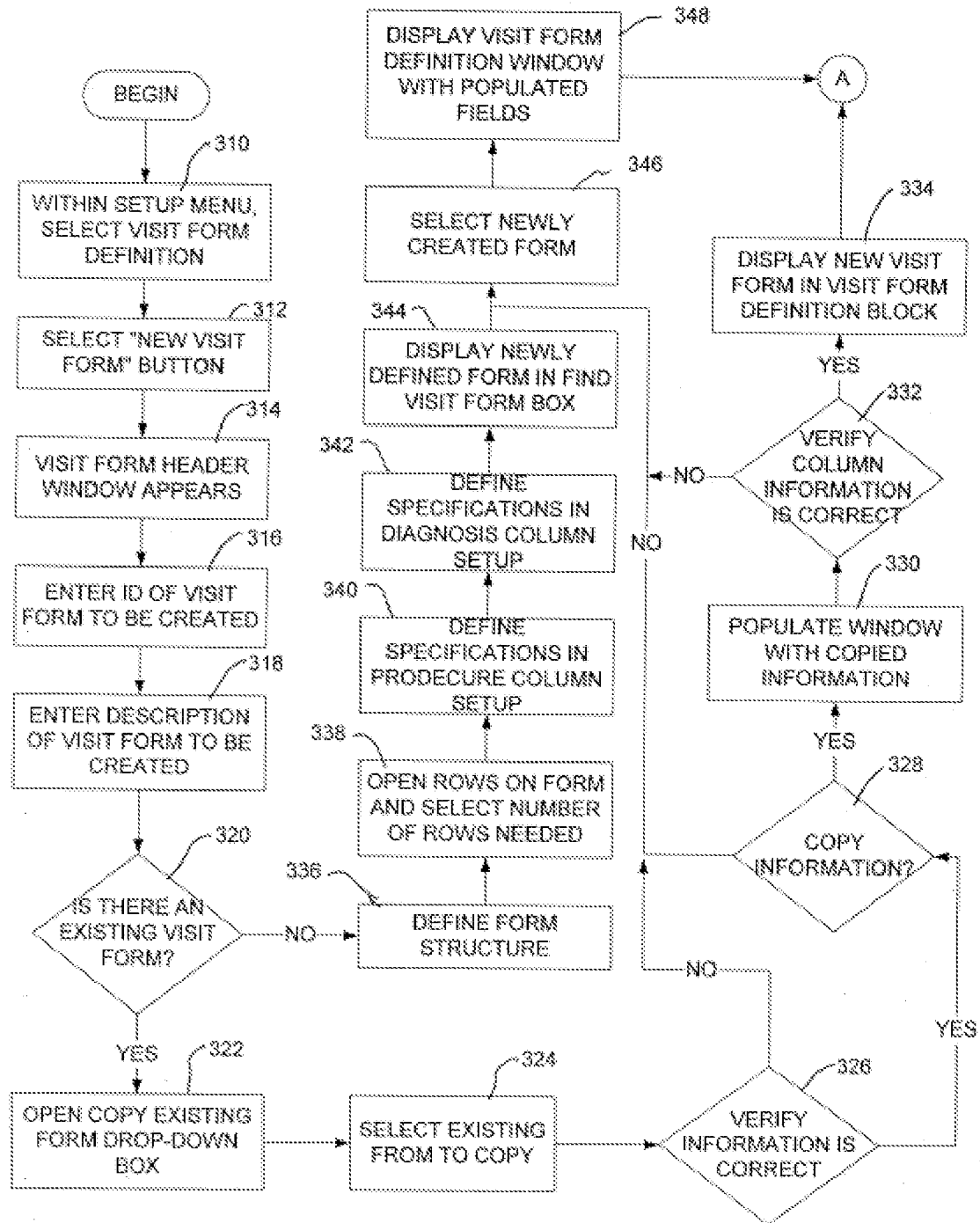


Fig. 3A

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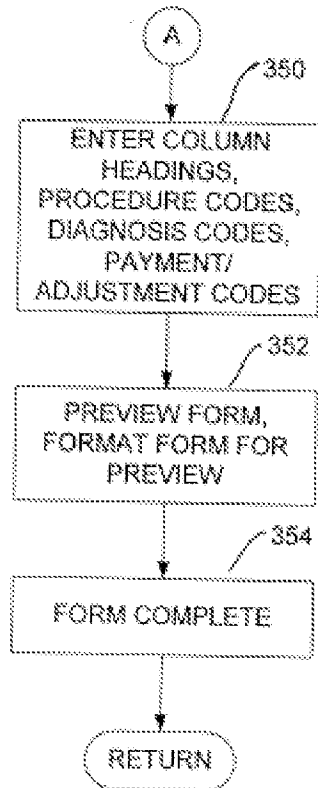


Fig. 3B

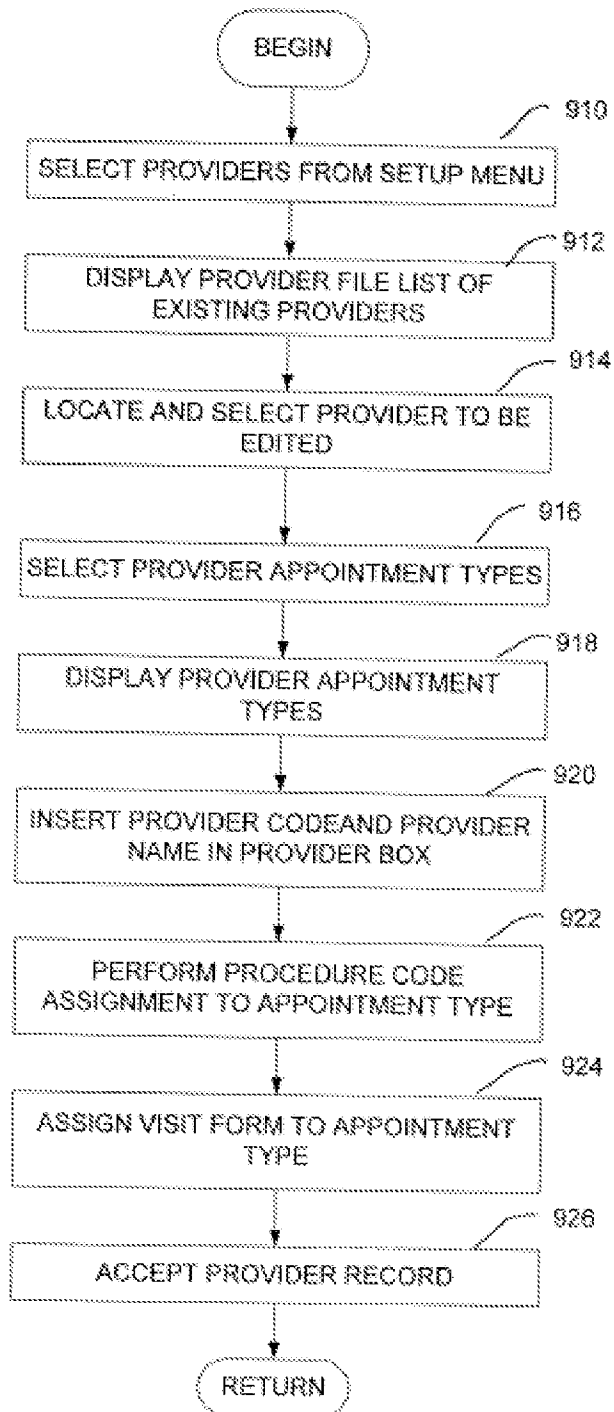


Fig. 9

Title: METHOD AND SYSTEM FOR RECORDING AND MAINTAINING PATIENT HISTORY DATA
AS WELL AS GENERATING CONCURRENT BILLING RECORDS

Inventor: Dale Sandberg

Docket No.: 3855.29

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The 'Visit Form Header' dialog box (410) contains the following elements:

- 412**: Title bar 'Visit Form Header'.
- 414**: 'Visit Form ID' text box.
- 416**: 'Status' dropdown menu set to 'Creating new'.
- 418**: 'Description' text box.
- 420**: 'Copy Existing Form' dropdown menu.
- Buttons**: 'OK', 'Cancel', 'Delete', and 'Lock Form' on the right.
- Procedure Column Setup**: A table with columns 'Column', 'Width', 'Column Heading', 'Align', and 'Fmt'. It contains 5 rows for columns 1 through 5.
- Diagnosis Column Setup**: A table with columns 'Column', 'Width', 'Column Heading', 'Align', and 'Fmt'. It contains 3 rows for columns 1 through 3.
- Form Options**: 'Rows On Form' dropdown (set to 6), 'Max Col Width' text box, and 'Selected Col Width' text box.

Fig. 4A

This figure shows the 'Visit Form Header' dialog box (410) with two confirmation dialogs overlaid:

- 422**: A dialog titled 'A/R' with a warning icon and the text 'Creating form BLD from BLC - OK?'. It has 'Yes' and 'No' buttons.
- 424**: A dialog titled 'A/R' with a warning icon and the text 'Copy detail lines also?'. It has 'Yes' and 'No' buttons.

The background dialog box (410) shows the same fields as Fig. 4A, with the 'Procedure Column Setup' table now containing the text 'A/R' in the 'Column Heading' column for row 1.

Fig. 4B

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Visit Form Header

Visit Form ID: BLD Status: Unlocked

Description: Sample Visit Form (2)

Copy Existing Form: BLD - Sample Form - Unlocked

Buttons: OK, Cancel, Delete, Lock Form

Procedure Column Setup

Column	Width	Column Heading	Align	Field
1	2.50	Description	L	D
2	0.70	Code	L	C
3	0.70	Amount	R	A
4				
5				

Diagnosis Column Setup

Column	Width	Column Heading	Align	Field
1	2.50	Description	L	D
2	0.70	Code	L	C
3	0.20	Flag	L	F

Rows On Form: 0 (Max Col: 3.95, Selected Col Width:)

Fig. 4C

Visit Form Definition

Visit Form ID: Description: Status: Find Visit Form:

Buttons: OK, Cancel, Add/Update, Delete Row, Clear Selection, Refresh, New Visit Form, Visit Form Header, Form Preview, Move Rows Up, Move Rows Down

Row	Code	Description	File Type
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
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99			
100			

Row Size: Total Rows: 112, Columns: 2, Rows Per Col: 56

Select CPT, Select Diagnosis, Select Add / Pmts

Fig. 5

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[illegible]

Fig. 6

[illegible]

Fig. 7

Title: METHOD AND SYSTEM FOR RECORDING AND MAINTAINING PATIENT HISTORY DATA
AS WELL AS GENERATING CONCURRENT BILLING RECORDS

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Provider Appointment Types

Provider: Robert W. Smith

App. Type	Description	Procedure	Description
CL	Contact Lens Check	99211	Office Visit Level 1-Established Patient
EX	Exam w/refraction	99211	Office Visit Level 1-Established Patient
PO	Post-Op	56984	CAT Post Op
VF	Visual Field	92082	Visual Field Intermediate

Buttons: OK, Add/Update, Delete, Clear Selection, Refresh

App. Type: CL, Description: Contact Lens Check, Procedure: 99211, Description: Office Visit Level 1-Est, Visit Form: CL, Description: Contact Lens Visit Form

Select App. Type: 92310, Select Visit Form Code: []

Find Procedure: []

Fig. 8

1112 1110

Business Functions

From: 05/03/1999 To: 05/03/1999

Provider: [] Facility: []

Insurance: Comp: [] Smg: []

Buttons: Run, Print Preview, Select/Refresh, Registration, Visit Detail, Materials Bid, Reset Ins Sel

Process All Displayed: ☐ ☒ Dsply Patients Not Seen ☐ Dsply Seen Not Posted ☒ Dsply Patients Seen ☒ Dsply No Show Patients

Print Visit Forms: ☐ Post From Visit Forms: ☒ ☐ Print Reg Forms: ☐ ☐ Flag Patients as Seen: ☐ ☐ Print Ins Forms: ☐ ☐ Flag Patients as No Show: ☐ ☐ Print Schedule Roster: ☐ ☐ Create Patient Recalls: ☐ ☐ Insurance: ☐ Full Full Date Range: ☐ ☐ Enoxig: ☐ Paper: ☐ Duplicate Insurance: ☐ ☐ Phone Log Entries: ☐ ☐ Include Late Charges: ☐ ☐ Live Charges Only: ☐ ☐ Pending Forms: ☐ ☐ Secondary Forms: ☐ ☐ May 1999: Sun Mon Tue Wed Thu Fri Sat 25 26 27 28 29 30 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 1 2 3 4 5

Date	Provider	Time	SSH/Pat ID	Last Name	First Name	Phone	Visit No.	Fac	AppTp	Status
05/03/1999	RWC	09:00 AM	37408200	Anderson	Sharon	555-444-1111	8	02	BRNK	
05/03/1999	RWC	09:30 AM	387240322	Gallin	Kathryn	555-444-2938	87	02	OV	
05/03/1999	RWC	10:00 AM	1000	Gallin	Micah	555-444-2938	0	02	OV	
05/03/1999	RWC	10:30 AM	263849203	Hopkins	David	555-444-3829	94	02	EX	
05/03/1999	RWC	11:00 AM	593220348	Johnson	John	555-444-4767	0	02	VF	
05/03/1999	RWC	01:00 PM	393208228	Stanley	Adam	555-444-0850	50	02	OV	Pat Seen 1 Trans Post
05/03/1999	RWC	01:30 PM	396699989	Stanley	Heather	555-444-0850	80	02	OV	
05/03/1999	RWC	02:00 PM	1016	England	Arthur	555-444-5739	0	02	CL	
05/03/1999	RWC	03:00 PM	1015	Donaldson	Eric	555-444-0328	0	02	OV	

Fig. 11

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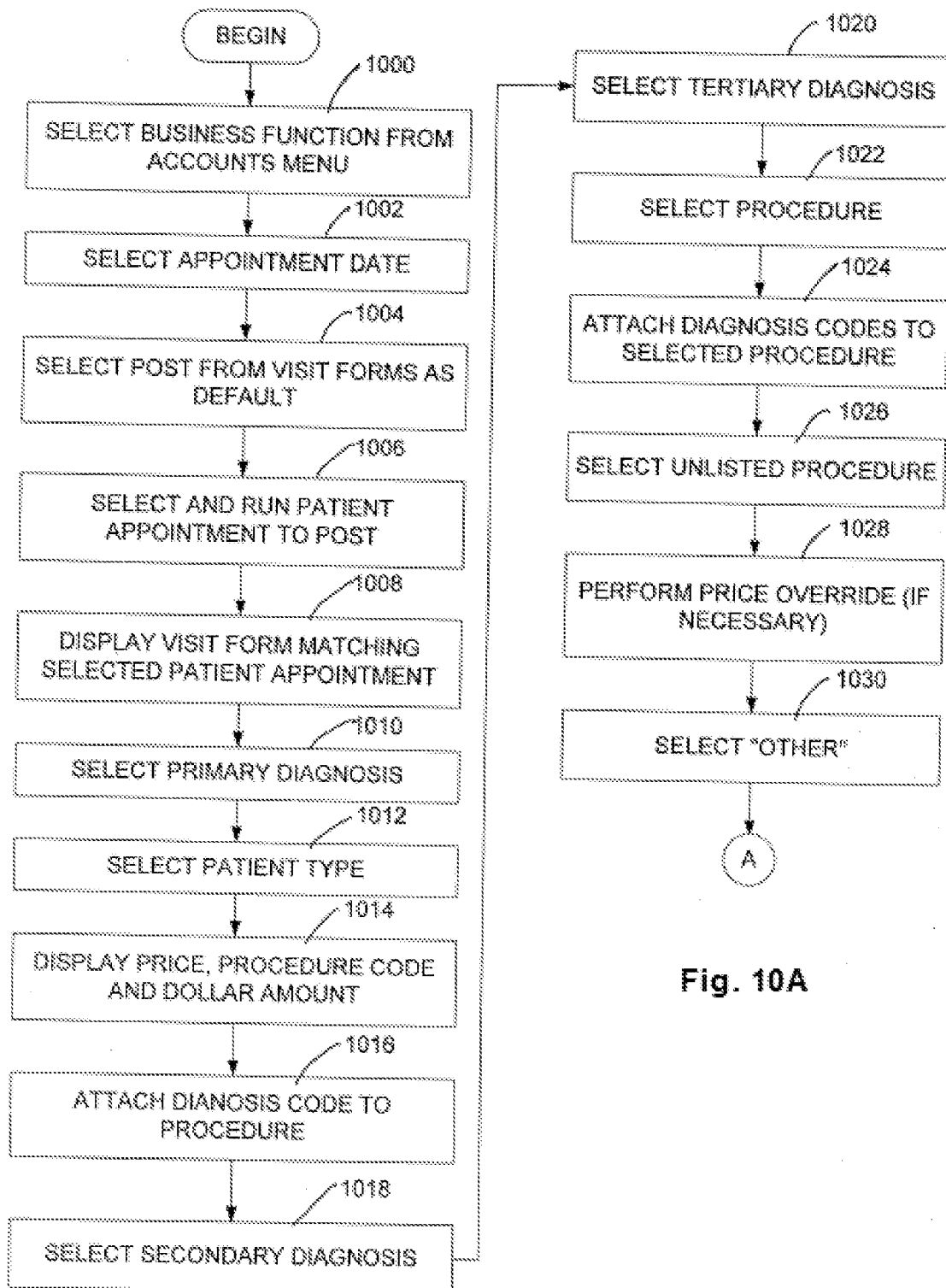


Fig. 10A

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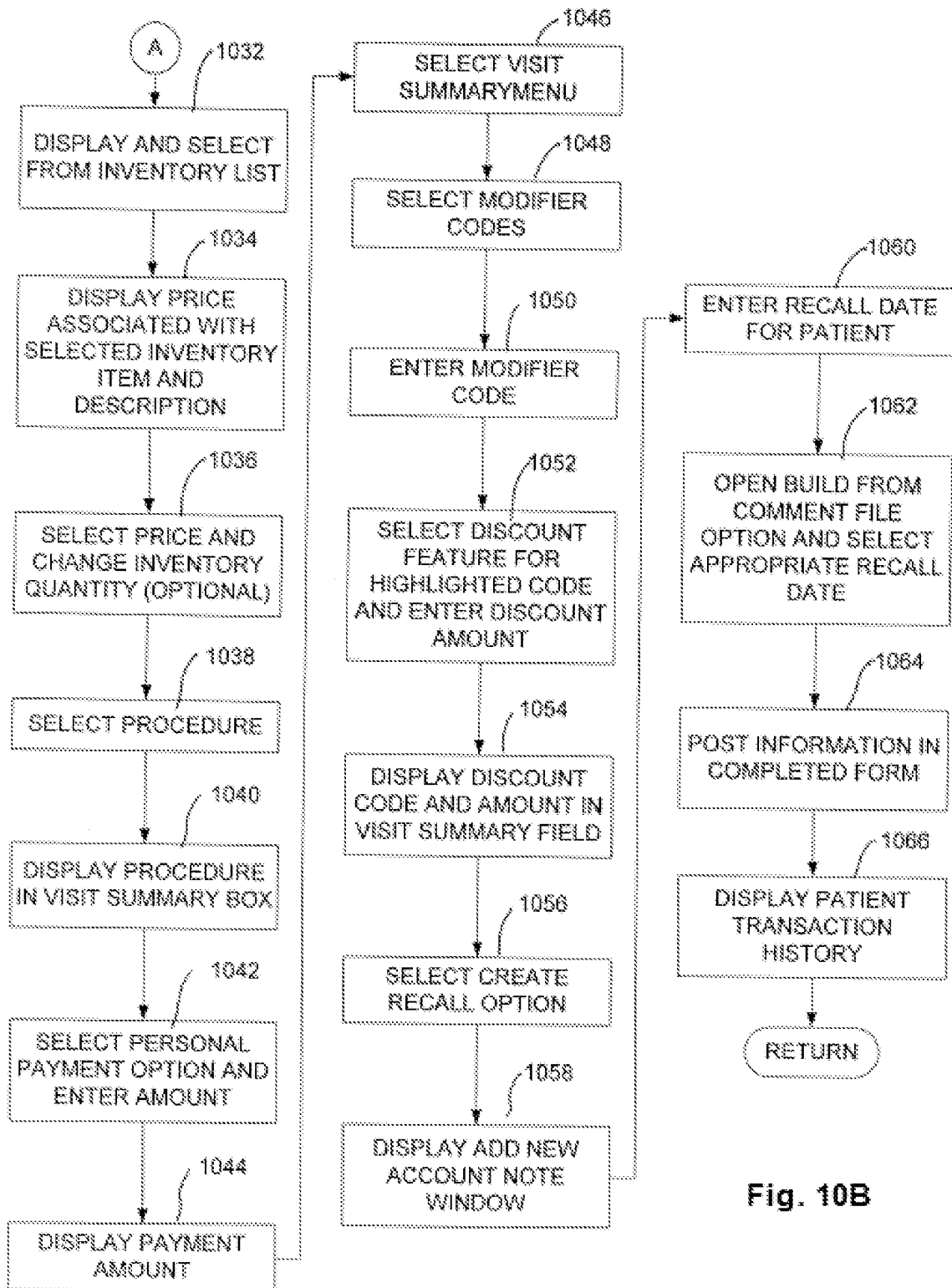


Fig. 10B

Title: METHOD AND SYSTEM FOR RECORDING AND MAINTAINING PATIENT HISTORY DATA
AS WELL AS GENERATING CONCURRENT BILLING RECORDS

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Visit Form Entry					
Eye Care Clinic				Visit #	81
Appointment Date	05-03-1999	Appointment Time	09:00	Account Number	1000
Patient Name / SSN	Anderson, Susan	Sex	F	Date of Birth / Age	07-23-1977 21
Address	1234 Miller Rd Anywhere, KS 65555	Insurance Company	BCBS1	Home Phone	888-111-4444
				Work Phone	888-111-4444
				Account Balance (prior to visit)	3,660.50
EVALUATION AND MANAGEMENT SERVICES			MEDICAL DIAGNOSIS/TREATMENT		
New Patient			RVC		
Office Visit Level 1 - New Patient	99210		Foreign Body Removal (superficial)	65205	
Office Visit Level 2 - New Patient	99202		Conjunctival Foreign Body Removal	65210	
Office Visit Level 3 - New Patient	99203		Corneal Foreign Body Removal (w/o slit lamp)	65220	
Office Visit Level 4 - New Patient	99204		Corneal Foreign Body Removal (w/ slit lamp)	65222	
Office Visit Level 5 - New Patient	99205		Scraping of cornea for culture	65430	
Intermediate Exam - New Patient	92002		Removal of corneal epithelial abrasion, curette	65435	
Comprehensive Exam - New Patient	92004		W/ application of chelating agent	65436	
Refraction - New Patient	92015		Correction of Trichiasis, Epilation	67820	
			Closure of Lacrimal Puncture by Plug	68781	
			Dilation of Lacrimal Puncture	68800	
Established Patient			Probing of Nasolacrimal Duct		
Office Visit Level 1 - Established Patient	99211		Probing of Lacrimal Canaliculi	68840	
Office Visit Level 2 - Established Patient	99212		Unlisted Procedure, lacrimal system	68899	
Office Visit Level 3 - Established Patient	99213		Glucose screening	62948	
Office Visit Level 4 - Established Patient	99214		Culture, Bacterial, Definitive, Blood	67040	
Office Visit Level 5 - Established Patient	99215		Culture or direct Bacterial Identification Method	67072	
Intermediate Exam - Est. Patient	92012		Culture, Bacterial, any source, Anaerobic	67075	
Comprehensive Exam - Est. Patient	92014		Culture, Fungi, Def. ID of each Fungus	67101	
RK Post Op	99026		Smear, Primary Source	67205	
CAT Post Op	50984				
Special Ophthalmological Services			CONTACT LENS SERVICES		
Gonioscopy	92020		Fitting/Contact Lens, Material/Disease	92070	
Visual Field Limited	92081		CL Diagnosis/Adaption	92310	
Serial Tonometry	92103		Aphakia (one eye)	92311	
Ophthalmoscopy Ext.	92225		Aphakia (two eyes)	92312	
Ophthalmoscopy, Sub. Ext.	92226		Modification/Clean and Polish	92325	
Fundus Photography	92250		OTHER - Contact Lens Materials	CL	
Ophthalmodynamometry	92250				
External Ocular Photography	92285		GLASSES SERVICES		
			Frame Services	FRAME	
			Ophthalmic Lens Treatment	LENS	
DIAGNOSIS			DIAGNOSIS		
Astigmatism (regular)	367.21		Allergic conjunctivitis	372.14	
Astigmatism (irregular)	367.22		Foreign Body - Conjunctiva	930.10	
Hyperopia	367.0		Hemorrhage subconjunctival	372.72	
Malingering	765.2		Cornea abrasion	918.1	
Myopia	367.1		Black eye	921.0	
Presbyopia	367.4		Blepharitis	373.00	
Spasm of accommodation	367.53		Chalazion	373.2	
Suppression	368.31		Allergic dermatitis	373.32	
Transient change	367.81		Lid Lesion	373.9	
Anisokoria	367.32		Eye pain	379.81	
Albinism	270.2		Macular degeneration	362.50	
Amblyopia	368.00		Peripheral degeneration	362.60	
Arteriosclerosis	440.9		Retinal hole	361.31	
Asthenopia (photophobia)	368.13		Hemorrhage	379.23	
Bells palsy	351.0		Vitreous Floaters	379.24	
Burn of eye and adnexa	940.9				
Color deficiencies	368.5		Patient Co-Pay	COPAY	
Covergence insufficiency	378.63		Personal Payment - Cash	PPCA	
Diabetes history	250		Personal Payment - Check	PPCK	
Diplopia	368.2		Discount	DISC	
Glaucoma	780.4		VISIT TOTAL		

Fig. 12

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Category Code CL Cancel OK

V25211 - Contact Lenses Soft Toric Disposable 6.50 1 22.00

S123 - Soft Contact Lenses
S124 - Hard Contact Lenses
V2510 - Contact Lens 02
V2510B1 - Contact Lenses Bifocal 02
V2511 - Contact Lens Soft Toric 02
V2520 - Contact Lenses Soft
V25201 - Contact Lenses Soft Disposable
V2520B1 - Contact Lenses Soft Bifocal
V2521 - Contact Lenses Soft Toric
V25211 - Contact Lenses Soft Toric Disposable

ing 67040
tion Method 87072
aerobic 87075
igus 87101
87205

LENS SERVICES

ase 92070
CL Diagnosis/Adaption 92310
Aphakia (one eye) 92311
Aphakia (two eyes) 92312
Modification/Clean and Polish 92325
OTHER - Contact Lens Materials CL

1210

Fig. 13

1410

Add New Account Note

Account Number 1000 Add Note

Account Name Anderson, Jeremy

Patient Number 374992031 | Susan

Follow Up Date

Select Note Type Code R - Recalls

Provider Code RWC - Robert W. Coulter

Contact Name

Build From Comment File

Note

Fig. 14

Title: METHOD AND SYSTEM FOR RECORDING AND MAINTAINING PATIENT HISTORY DATA
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EVALUATION AND MANAGEMENT SERVICES				MEDICAL DIAGNOSIS/TREATMENT			
New Patient				Office Visit			
Office Visit Level 1 - New Patient	99210			Foreign Body Removal (superficial)	65205	60.00	
Office Visit Level 2 - New Patient	99211			Conjunctival Foreign Body Removal	65210		
Office Visit Level 3 - New Patient	99212			Corneal Foreign Body Removal (w/ wick suture)	65220		
Office Visit Level 4 - New Patient	99213			Corneal Foreign Body Removal (w/ wick suture)	65222		
Office Visit Level 5 - New Patient	99214			Scraping of cornea for culture	65435		
Intermediate Exam - New Patient	92002			Removal of corneal epithelial abrasion, sutureless	65435		
Comprehensive Exam - New Patient	92004			Vitri application of chelating agent	65438		
Refraction - New Patient	92015			Correction of Trichiasis, Epilation	67920		
				Closure of Lacrimal Puncture by Plug	68781		
Established Patient				Office Visit			
Office Visit Level 1 - Established Patient	99211			Dilation of Lacrimal Puncture	68800		
Office Visit Level 2 - Established Patient	99212			Probing of Nasolacrimal Duct	68825		
Office Visit Level 3 - Established Patient	99213			Probing of Lacrimal Canaliculi	68840		
Office Visit Level 4 - Established Patient	99214	60.00		Unilateral Procedure, lacrimal system	68899	22.00	
Office Visit Level 5 - Established Patient	99215			Glucose screening	82345		
Intermediate Exam - Est. Patient	92012			Culture, Bacterial, definitive, Bloodless	87640		
Comprehensive Exam - Est. Patient	92014			Culture or direct Bacterial Identification Method	87672		
RK Post Op	99034			Culture, Bacterial, any source, Anaerobic	87675		
CAI Post Op	99084			Culture, Fungal, Def. ID of each Fungus	87705		
				Culture, Fungal, Source	87705		
Special Ophthalmological Services				CONTACT LENS SERVICES			
Gonioscopy	92020			Fitting/Contact Lens, Material/Design	92070		
Visual Field Limited	92081			CL Diagnosis/Adaptation	92310		
Sensory Tonometry	92100			Alphakia (one eye)	92311		
Ophthalmoscopy Ext.	92225			Alphakia (two eyes)	92312		
Ophthalmoscopy, Sub. Ext.	92226			Modification/Design and Polish	92325		
Fundus Photography	92250			OTHER - Contact Lens Materials	CL	30.00	
Ophthalmocycloplegic	92260						
External Color Photography	92295			GLASSES SERVICES			
				Frame Services	FRAME		
				Ophthalmic Lens Treatment	LENS		

Fig. 15

Title: METHOD AND SYSTEM FOR RECORDING AND MAINTAINING PATIENT HISTORY DATA
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06/17/1999		Eye Care Clinic					Page 1	
Transaction History For Account 1000 (Anderson, Jeremy) from 7-1999								
Period	TranDate	Patient Name	Type	Code Description	Amount	Qty	Visit	Batch
8-1999	06/17/1999	Anderson, Susan	C	99214 Office Visit Level 4-Est Patient	60.00	0	167	VT
8-1999	06/17/1999	Anderson, Susan	A	BCWO BlueCross/Blue Shield Write-off	-10.00	0	167	VT ADJ
8-1999	06/17/1999	Anderson, Susan	C	65205 Foreign Body Removal	60.00	0	167	VT
8-1999	06/17/1999	Anderson, Susan	A	BCWO BlueCross/Blue Shield Write-off	-10.00	0	167	VT ADJ
8-1999	06/17/1999	Anderson, Susan	C	68859 Unlisted Procedure, lacrimal sys	22.00	0	167	VT
8-1999	06/17/1999	Anderson, Susan	C	V2020 Contact Lens Materials	20.00	0	167	VT
8-1999	06/17/1999	Anderson, Susan	P	PPCK Personal Payment-Check	-60.00	0	167	VT
8-1999	06/17/1999	Anderson, Susan	C	TAX Sales Tax	1.25	0	167	VT ADJ
8-1999	06/17/1999	Anderson, Susan	A	DISC Discount	-2.00	0	167	VT
8-1999		Subtotal for this Period			91.25 **			
		Current Account Total Due			3,751.75 ***			

Fig. 16